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OFF		Application Numbe	r	10/687,34	4		
TRANSMIT	Filing Date		October 15, 2003				
MAY 0 4 2006 ( ) FORM	First Named Inventor		Osorio, et al.				
		Art Unit		3736			
RADENAST AND AND ASSESSED ASSE	e after initial filing)	Examiner Name		Michael C.	. Astorino		
Total Number of Pages in This Su	Attorney Docket Nu	ımber	011738.00149				
	ENCL	OSURES (check all tha	t apply)				
Fee Transmittal Form	☐ Drawing	☐ Drawing(s)		After Allo	owance Communication to TC		
Fee Attached	Licensin	Licensing-related Papers			Communication to Board als and Interferences		
Amendment / Reply	Petition			Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)			
After Final		to Convert to a nal Application		Proprieta	ary Information		
Affidavits/declaration(s)		Power of Attorney, Revocation Change of Correspondence Address			Status Letter		
Extension of Time Request	☐ Termina	☐ Terminal Disclaimer ☐ Other Enclosure(s) (please identify below):					
Express Abandonment Requ	est	t for Refund	Notice of Non-Compliant (37 CFR 1.121), 2 pages ponse/Amendment as				
☐ Information Disclosure State					exed to PTO on 12/5/2005 (28		
	☐ La	andscape Table on CD		Certificate of Return Rece	f Express Mail eipt Postcard		
Certified Copy of Priority Document(s) Reply to Missing Parts/	Document(s) with this corr				harge any fees in connection 3. A duplicate of this sheet		
Incomplete Application							
Reply to Missing Parts under 37 CFR1.52 or 1.	53						
	SIGNATURE OF	APPLICANT, ATTOR	RNEY, OF	R AGENT			
Firm	Banner 8	k Witcoff, Ltd.					
Signature ;							
Printed Name	Binal J. P	atel					
Date	May 4, 20	06	Reg. No.	42,065			
	CERTIFIC	ATE OF TRANSMISS	ION/MAII	LING			
I hereby certify that this corresp Service with sufficient postage Alexandria, VA 22313-1450 on tl	as first class mail	in an envelope addres	e USPTO sed to: C	or deposited ommissioner	with the United States Postal for Patents, P.O. Box 1450,		
Signature							
Typed or printed name				Date			

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## CERTIFICATE OF MAILING (PATENT)

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Deposited: May 4, 2006

I hereby certify that the attached correspondence, identified below, is being deposited with the United States Postal Service as "Express Mail Post Office to Addressee" under 37 CFR 1.10 on the date indicated above and is addressed to the Commissioner for Patents, Mail Stop: AMENDMENT, P.O. Box 1450, Alexandria, VA 22313.1450.

Patent Application of:

Osorio, et al.

Serial No.

10/687,344

Title:

Screening Techniques For Management Of A Nervous System

By Jo Smil

Disorder

Attorney Docket No.

011738.00149

- Transmittal Letter, 1 page
- Response to Second Notice of Non-Compliant Amendment (37 CFR 1.121), 2 pages
- Response/Amendment as previously faxed to PTO on 12/5/2005 (28 pages)
- Return Receipt Postcard



## PATENT IN THE UNITED STATES PATENT AND TRADEMARK OFFICE (Attorney Docket No. 011738.00149)

Group Art Unit: 3736
•
Examiner: Michael C. Astorino
Confirmation No. 7817

## RESPONSE TO SECOND NOTICE OF NON-COMPLIANT AMENDMENT (37 CFR 1.121)

Mail Stop: AMENDMENT Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313.1450

Sir:

This paper is responsive to the April 4, 2006 Office Action. The Office Action indicated that a subsequently submitted copy of the response, which was originally submitted on December 5, 2005, was non-compliant because of problems with the quality of the facsimile and a response was due within 1 month of the date of mailing of the Office Action, making this paper due on or before May 4, 2006.

Applicants note that two attempts where made to provide a legible copy of the response in response to the first notice of a non-compliant amendment, first on March 6, 2006 a copy of the response was submitted again by facsimile. In addition, on March 7, 2006 a copy of the response was sent by express mail. Therefore,

Applicants believe the facsimile copy is likely the copy that the Examiner is referring to as being non-compliant because the copy of the response submitted by Express mail should have been received without problems.

However, to ensure the previously submitted response is received in a legible manner, another copy of the response originally submitted on December 5, 2005 is being submitted with this paper and this additional copy and this paper are being filed via Express mail. No fees are believed owed with this response, however, the Commissioner is authorized to debit or credit our Deposit Account 19-0733 accordingly for any fees owed or for any overpayment made.

Respectfully Submitted,

BANNER & WITCOFF, LTD.

Binal J. Patel Reg. No. 42,065

Dated: May 4, 2006

Banner & Witcoff, Ltd. Ten South Wacker Drive Suite 3000 Chicago, Illinois 60606

Tel: (312) 463-5000

Fax: (312) 463-5001



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COMPANY:	DATE:				
Mail Stop AMENDMENT	December 5, 2005				
FAX NO:	TOTAL NO. OF PAGES: (Including cover sheet)				
571-273-8300	27				
YOUR REFERENCE NO.:	OUR REFERENCE (CAN) NO.:				
	011738 00149				

RE:

Filing Of Response/Amendment and 1 month extension of time For U.S. Serial No. 10/687,344

Application Of Osorio, et al. Filed October 15, 2003

Title: Screening Techniques For Management Of A Nervous System Disorder

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		Filing Date		October 15, 2003		
MAY O d 20 E) FURIVI		First Named Inventor		Osorio, et al.		
2008		Art Unit		3736		
(to be for all correspondence after initial filing)		Examiner Name		Michael C. Astorino		
Total Humber of Pages in This Submiss		Attorney Docket N	umber	011738.00	0149	
	ENCLO	SURES (check all the	at apply)	<del></del>		
☐ Fee Transmittal Form	☐ Drawing(s			After All	owance Communication to TC	
Fee Attached	Licensing-	-related Papers			Communication to Board	
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Amendment / Reply				,,	Notice, Brief, Reply Brief)	
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Certified Copy of Priority Document(s)  Remarks with this cor					harge any fees in connection	
Reply to Missing Parts/	with this correspondence to Deposit Account No. 19-0733. A duplicate of this she is enclosed.				•	
Incomplete Application						
Reply to Missing Parts under 37 CFR1.52 or 1.53						
		APPLICANT, ATTO	RNEY, O	RAGENT		
Firm	Banner & \	anner & Witcoff, LTD.				
Signature		XX				
Printed Name Binal J. Pa		tel				
Date December		5, 2005 Reg. No. 42,065				
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I hereby certify that this corresponden Service with sufficient postage as fin Alexandria, VA 22313-1450 on the date	st class mail in	an envelope addres	e USPTO sed to: C	or deposited ommissioner	with the United States Postal for Patents, P.O. Box 1450,	
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Typed or printed name Than	, -1 /	SON		Date	December 5, 2005	

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Application Number   10/687,344   Filing Date   October 15, 2003   Fist Named Inventor   Osorio, et al.   Applicant prims small entity status. See 37 CFR 1.27   TOTAL AMOUNT OF PAYMENT   (s) 320,00   Art Unit   3736   Attorney Docket No.   011738.00149   METHOD OF PAYMENT (check all that apply)   Check   Credit Card   Money Order   None   Other (please identify) :		re on 12/08/ ted Appropri	2004. iations Act, 2005 (H.R. 4818)	),		Com	plete if Known		
Application Type   Fee (S)   Fee(S)	FEE TRA	ANS	MITTAL		Application Number	10/687,34	4		
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MATURE   M	/بي				First Named Inventor	Osorio, et	al.		
METHOD OF PAYMENT (check all that apply)	Applicant Jaims small er	ntity stat	us. See 37 CFR 1.2	7	Examiner Name	Michael C	. Astorino		
METHOD OF PAYMENT (check all that apply)		ENT	(a) 330 00		Art Unit	3736			
Check	TOTAL AMOUNT OF TATM		(\$) 320.00		Attorney Docket No.	011738.00	0149		
Deposit Account Name: Banner & Witcoff, LTD.  For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)    Charge fee(s) indicated below   Charge fee(s) indicated below, except for the filling fee   Charge fee(s) indicated below, except fee   Charge fee(s) indicated below, except fee   Charge fee(s) indicated below indicated below, except fee   Charge fee(s) indicated below indi	METHOD OF PAYMENT (								
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)    Charge fee(s) indicated below   Charge fee(s) indicated below, except for the filing fee	☐ Check ☐ Credit Card	☐ Mor	ney Order 🔲 None	□ 01	ther (please identify) :				
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2. EXCESS CLAIM FEES  Fee Description Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues) Each independent claims Fee (\$) Fee (\$) Each independent claims Fee (\$) Fee Paid (\$) Multiple dependent claims  Total Claims Fee (\$) Fee Paid (\$)  HP = highest number of total claims paid for, if greater than 20. Indep. Claims Extra Claims Fee(\$) Fee Paid (\$)  HP = highest number of independent claims paid for, if greater than 3.  3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets Extra Sheets Number of each additional 50 or fraction thereof see States Sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets Extra Sheets Number of each additional 50 or fraction thereof see (\$) Fee Paid (\$)  — 100 = /50 = (round up to a whole number) x =  4. OTHER FEE(\$)  Non-English Specification, \$130 fee (no small entity discount)  Other (e.g., late filing surcharge): Petition for One Month Extension of Time  Registration No. (Attorney/Agent) 42,065 Telephone 312-463-5000	-								
Fee Description   Fee (\$)   Fee (\$)   Fee (\$)			100	U	U	U	U	Small Entity	
Each claim over 20 (including Reissues)  Each independent claim over 3 (including Reissues)  Multiple dependent claim over 3 (including Reissues)  Multiple dependent claims  Total Claims  Extra Claims  Fee(\$) Fee Paid (\$)  HP = highest number of total claims paid for, if greater than 20.  Indep. Claims  Extra Claims  Extra Claims  Fee(\$) Fee Paid (\$)  HP = highest number of total claims paid for, if greater than 3.  APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets  Extra Sheets  Number of each additional 50 or fraction thereof  Fee (\$) Fee Paid (\$)  — - 100 = / 50 = (round up to a whole number) x =  4. OTHER FEE(\$)  Non-English Specification, \$130 fee (no small entity discount)  Other (e.g., late filing surcharge): Petition for One Month Extension of Time  Registration No. (Attorney/Agent)  Registration No. (Attorney/Agent)  A2,065  Telephone  312-463-5000		•					Fee (\$)		
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4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): Petition for One Month Extension of Time  SUBMITTED BY  Registration No. (Attorney/Agent) 42,065 Telephone 312-463-5000	Total Sheets Ex	xtra Sh	eets <u>Number o</u>	f each	<u>additional 50 or fra</u>		f Fee (\$)	Fee Paid (\$)	
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Application Of Osorio, et al.			

Filed October 15, 2003

Title: Screening Techniques For Management Of A Nervous System Disorder

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